Executive Officer's License Application for Transfer

Nebraska Department of Banking & Finance www.ndbf.ne.gov

1526 K Street, Suite 300 Lincoln, NE 68508-2732 402-471-2171

Section 8-139 of the Nebraska Banking Act provides that "No person shall act as an active executive officer of any bank until such bank shall apply for and obtain from the Department a license for such person to so act."

PART I: This section to be con	inpleted by the Applicant Bo	alik.
Main Office Name		
Street Address	City	
County	State	Zip Code
Applicant Bank Name and Address to mail license to if	different than above:	
Name		
Street Address	City	
County	State	Zip Code
o you wish email notification of approval? Yes □ No □	Email Address	
Do you wish email notification of approval? Yes ☐ No ☐	Email Address	
This application is for Class I □ or Class II □ Exec	utive Officer's License	
Please attach the following to the completed applic	For Department Use Only	
A resume for the Individual Applicant referencing current as of the date of the application.	g recent work activities,	
A completed United States Citizenship Attestation transferring EOL is dated prior to January 15, 26 form.	•	
☐ A check in the amount of \$50.00 made Department of Banking and Finance.	payable to the Nebraska	
AUTH	ORITY	
, (President Name of Signatory (printed or typed) Bank for which this Individual Application pertains, requests to conveying the authority to act as an active executive officer of		, , , , , ,
Signed this day of	, .	
<u> </u>	,	
Signature of President, CEO, Executive VP, or Board Members	 er	

PART II: This section to be completed by the Individual for whom the Application is made.

Attach additional sheets as necessary to fully answer any question.

Biog	гарпісаі керогі:				
Individu	ual Name				
Street ((Home Address)			City	
County			State		Zip Code
Last 4	digits of Social Security Number			Month and Date of	Birth (No year requested)
Preferre	ed Telephone Contact Number				
Applica	int Email Address				
Existinç	g Executive Officer License Number	Ex	isting Class (I or II)		
Date E	xecutive Office License was originally issued				
Bank L	ocation Where Applicant Will Work:				
Street /	Address			City	
County			State		Zip Code
Empl	loyment Record:				
m If "s	this Executive Officer's License anaking of loans or investments? "Yes", give details of your experisee attached" will be sufficient. "No", provide the Bank's training	ence. If the attac	hed resume det	ails lending exper	☐ Yes ☐ No
Th	ave you ever been dismissed or nan Honorable discharge from mi "yes," complete the following:		rom any past en	mployment, includi	ing receiving an Other ☐ Yes ☐ No
	Employer's Name, Address, Telephone	Position	Date of Discharge	Explan *Attach additional pag explana	ge if needed for full

3.	List the duties and responsibilities you will have at the Applicant Bank.	
Ge	eneral Information:	
1.	Have you or any business interest of yours undergone bankruptcy? If "yes," give full details including place and date.	☐ Yes ☐ No
2.	Have you ever been the subject of a garnishment? If "yes," give full details including place and date.	☐ Yes ☐ No
3.	Have you ever been turned down or canceled on a personal, fidelity, or surety bond? If "yes," give name of bonding company and date of rejection or cancellation.	☐ Yes ☐ No
4.	To your knowledge, are you, or have you ever been, the subject of an investigation regard professional license? If "yes," give full details.	ing any ☐ Yes ☐ No
5.	Have you been arrested and/or convicted since the original issuance of your Executive Off "yes," give full details.	Officers License? ☐ Yes ☐ No
	ATTESTATION	
sul	ertify that the information contained in this application is true, correct, and complete, and is current a abmission. I acknowledge that any misrepresentation or omission of a material fact constitutes fraud and may subject me to legal or administrative sanctions.	
Sig	gned this,	
Sig	gnature of Individual Applicant	